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today our pupil and graduate nurses are representatives of our best families.

In 1904, we saw the need of organization and the Louisiana State Nurses' Association was formed. That same year a bill was brought before the State Legislature asking for state registration but was defeated on the ground that it was unconstitutional. We had asked for a mixed board and, according to the laws of Louisiana, women cannot serve on state boards. Well, we worked and waited, and in 1912 again presented a bill which was passed. Now, though our board is composed entirely of doctors, the Louisiana State Nurses' Association nominate them for appointment by the governor of the state. After a little over two years we have approximately eight hundred registered nurses in the state and twelve accredited training schools. Registration is not compulsory, but the majority of the nurses have complied with the law.

In October 1914, we started a central directory for registered nurses only, which is meeting with much success. The registrar is a registered nurse. New Orleans is probably the best field of any city for the private nurse, as in the majority of cases the nurses do only twelve-hour duty. We have a number of nurses from other states located here, who are members of our Association and who are in excellent standing in the community.

IMPROVISING

A SWING AND CONVENIENT IRRIGATION

By LEONORE L. RALL, R.N.

Colorado Springs, Colo.

Even with a limited supply of articles in a small, and not too generously equipped hospital, one can find substitutes more readily than one can imagine by using a little thought and patience.

Go with me into a poorly furnished and almost destitute home and even there we will find, with a little practical ingenuity, something that will answer our purpose. In this particular instance (a surgical case), a young boy needed constant irrigation on a very bad limb and the limb had to be elevated. I stood perplexed, gazing at the ceiling, the loose plaster threatening a deluge at any moment. It would be perilous to even suggest such a thing as a nail or hook.

"We'll git them flies after a bit, Miss," the older brother ventured. "I am not after flies now," I replied, "but get me a board about twenty-six inches long and about four inches wide and I'll show you what I want."

After driving a nail into the centre of the board, we fastened it across one end of the opening in the double door, where a few remaining pegs told the story of grill work. Then we cut the tops off of a pair of old laced shoes; padded the inside with cotton and covered the whole with white muslin. We then ran strong cord through the lacings. One of these was placed under the heel and Achilles tendon, and the other under the knee. The bed, which was a narrow one, was moved into the doorway, leaving ample room to pass. The cords were fastened to either end of the board, making an excellent swing that could be shortened, or lengthened, at any time. This afforded free movement of the knee, without pain. The change of scene and the novelty delighted my patient beyond words.

Now the problem of irrigation confronted me. With a limited number of sheets, how was I to keep the bed dry? It was easy enough to use the douche bag for an irrigating can, but it was needed for another purpose. I converted my water bottle into one, by attaching a tube and irrigation point, regulating the flow with a clamp. The douche bag I used to catch the water, which dripped from the lowest point, the calf. The brother made a pyramid, which was by no means perfect but very neatly done, into the top of which we drove a nail to hold the bag. Then a funnel was placed in the bag under the calf and the tube ran into a pitcher at the side of the bed. This caught the drain water and kept the bed perfectly dry. One-half hour of every six the limb was released from the swing and laid on a pad. When the pad was not soiled, it was dried in the sun and used another time, thus saving rags and cotton.

A LIFTING BAND

By N. E. T.

Hartford, Conn.

Those who have occasion to lift bed patients from bed to couch or another bed will, I think, find this band useful.

Take two yards of strong cotton cloth 36 to 42 inches wide. Fold lengthwise so there will be three thicknesses, stitch long edges, fold ends over about seven inches, and stitch firmly, making a loop to slip the hand through.

To lift, pass the band under the patient's buttocks, place one arm under the shoulders, slip the other hand into one of the loops of the band. The person assisting takes the other loop and the patient's legs. This makes an easy lift for the patient and for those doing the lifting.